FEC FORM 1

## STATEMENT OF ORGANIZATION

| FORM 1                                | (See instructions)                           |   | Office use only   |
|---------------------------------------|--|---|-------------------|
| NAME OF COMMITTEE (in fu              | (Check if name is changed)                   | Example: If typying, type over the lines  | 12FE4M5           |
| Friends of Fred                       | Thompson, Inc.                               |   |                   |
|                                       |  | <u> </u>  |                   |
| ADDRESS (number and str               | P.O. Box 128349                              |   |                   |
| (Check if address                     |  | <u> </u>  |                   |
| is changed)                           | Nashville                                    |   | TN 37212 -        |
|                                       |  | CITY▲   | STATE▲ ZIP CODE ▲ |
| roberts2107@c                         |  |   | ı                 |
| 1 19591192197199                      |  |   |                   |
|                                       |  |   |                   |
| COMMITTEE'S WEB P                     | AGE ADDRESS (URL)                            |   |                   |
|                                       |  |   |                   |
|                                       |  |   |                   |
| COMMITTEE'S FAX NU                    | JMBER  |   |                   |
| بنا لبنا                              |  |   |                   |
| 2. DATE 0.6                           | / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y      |   |                   |
| 3. FEC IDENTIFICAT                    | TION NUMBER                                  | C C00438507   | 1                 |
| 4. IS THIS STATEME                    | ENT X NEW (N) OR                             | AMENDED (A)   |                   |
| I certify that I have examin          | ed this Statement and to the best of my know | wledge and belief it is true, correct ar  | d complete        |
| Type or Print Name of T               | reasurer Richard Roberts                     |   |                   |
| Signature of Treasurer                | Electronically Filed by Richard Re           | oberts  | Date 06 01 7 2008 |
| NOTE: Submission of fals              | e, erroneous, or incomplete information may  | v subject the person signing this Stat  | •                 |
| Office<br>Use<br>Only<br>FE3AN042.PDF |  | For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100 |                   |